

**Fill in this information to identify your case:**

United States Bankruptcy Court for the:

MIDDLE DISTRICT OF NORTH CAROLINA

Case number (if known)

Chapter

7☐ Check if this an amended filing

## Official Form 201

**Voluntary Petition for Non-Individuals Filing for Bankruptcy**

4/16

If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write the debtor's name and case number (if known). For more information, a separate document, *Instructions for Bankruptcy Forms for Non-Individuals*, is available.

1. Debtor's name Simplicity Sofas, Inc.

2. All other names debtor used in the last 8 years

Include any assumed names, trade names and *doing business as* names

3. Debtor's federal Employer Identification Number (EIN) 20-8342607

4. Debtor's address

Principal place of business

1711 Preferred Way  
High Point, NC 27260

Number, Street, City, State & ZIP Code

Guilford

County

Mailing address, if different from principal place of business

710 Westchester Drive, Apt. J  
High Point, NC 27262

P.O. Box, Number, Street, City, State & ZIP Code

Location of principal assets, if different from principal place of business

Number, Street, City, State & ZIP Code

5. Debtor's website (URL) www.simplicitysofas.com

6. Type of debtor

☒ Corporation (including Limited Liability Company (LLC) and Limited Liability Partnership (LLP))

☐ Partnership (excluding LLP)

☐ Other. Specify: \_\_\_\_\_

Debtor **Simplicity Sofas, Inc.**  
Name

Case number (if known)

**7. Describe debtor's business****A. Check one:**

- ☐ Health Care Business (as defined in 11 U.S.C. § 101(27A))
- ☐ Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B))
- ☐ Railroad (as defined in 11 U.S.C. § 101(44))
- ☐ Stockbroker (as defined in 11 U.S.C. § 101(53A))
- ☐ Commodity Broker (as defined in 11 U.S.C. § 101(6))
- ☐ Clearing Bank (as defined in 11 U.S.C. § 781(3))
- ☒ None of the above

**B. Check all that apply**

- ☐ Tax-exempt entity (as described in 26 U.S.C. §501)
- ☐ Investment company, including hedge fund or pooled investment vehicle (as defined in 15 U.S.C. §80a-3)
- ☐ Investment advisor (as defined in 15 U.S.C. §80b-2(a)(11))

**C. NAICS (North American Industry Classification System) 4-digit code that best describes debtor.**  
See <http://www.uscourts.gov/four-digit-national-association-naics-codes>.

**8. Under which chapter of the Bankruptcy Code is the debtor filing?****Check one:**☒ Chapter 7☐ Chapter 9☐ Chapter 11. **Check all that apply:**

- ☐ Debtor's aggregate noncontingent liquidated debts (excluding debts owed to insiders or affiliates) are less than \$2,566,050 (amount subject to adjustment on 4/01/19 and every 3 years after that).
- ☐ The debtor is a small business debtor as defined in 11 U.S.C. § 101(51D). If the debtor is a small business debtor, attach the most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return or if all of these documents do not exist, follow the procedure in 11 U.S.C. § 1116(1)(B).
- ☐ A plan is being filed with this petition.
- ☐ Acceptances of the plan were solicited prepetition from one or more classes of creditors, in accordance with 11 U.S.C. § 1126(b).
- ☐ The debtor is required to file periodic reports (for example, 10K and 10Q) with the Securities and Exchange Commission according to § 13 or 15(d) of the Securities Exchange Act of 1934. File the *attachment to Voluntary Petition for Non-Individuals Filing for Bankruptcy under Chapter 11* (Official Form 201A) with this form.
- ☐ The debtor is a shell company as defined in the Securities Exchange Act of 1934 Rule 12b-2.

☐ Chapter 12**9. Were prior bankruptcy cases filed by or against the debtor within the last 8 years?**☒ No.☐ Yes.

If more than 2 cases, attach a separate list.

District	_____	When	_____	Case number	_____
District	_____	When	_____	Case number	_____

**10. Are any bankruptcy cases pending or being filed by a business partner or an affiliate of the debtor?**☐ No☒ Yes.

List all cases. If more than 1, attach a separate list

Debtor	<b>Jeffrey Alan Frank</b>	Relationship	<b>President</b>
District	<b>MDNC</b>	When	<b>1/13/17</b>
		Case number, if known	<b>17-10035</b>

Debtor **Simplicity Sofas, Inc.**  
Name

Case number (if known)

**11. Why is the case filed in this district?***Check all that apply:*

- ☒ Debtor has had its domicile, principal place of business, or principal assets in this district for 180 days immediately preceding the date of this petition or for a longer part of such 180 days than in any other district.
- ☐ A bankruptcy case concerning debtor's affiliate, general partner, or partnership is pending in this district.

**12. Does the debtor own or have possession of any real property or personal property that needs immediate attention?**☒ No☐ Yes. Answer below for each property that needs immediate attention. Attach additional sheets if needed.**Why does the property need immediate attention?** (*Check all that apply.*)☐ It poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety.

What is the hazard? \_\_\_\_\_

☐ It needs to be physically secured or protected from the weather.☐ It includes perishable goods or assets that could quickly deteriorate or lose value without attention (for example, livestock, seasonal goods, meat, dairy, produce, or securities-related assets or other options).☐ Other \_\_\_\_\_**Where is the property?** \_\_\_\_\_

Number, Street, City, State &amp; ZIP Code

**Is the property insured?**☐ No☐ Yes. Insurance agency \_\_\_\_\_

Contact name \_\_\_\_\_

Phone \_\_\_\_\_

**Statistical and administrative information****13. Debtor's estimation of available funds***Check one:*☐ Funds will be available for distribution to unsecured creditors.☒ After any administrative expenses are paid, no funds will be available to unsecured creditors.**14. Estimated number of creditors**☒ 1-49☐ 50-99☐ 100-199☐ 200-999☐ 1,000-5,000☐ 5001-10,000☐ 10,001-25,000☐ 25,001-50,000☐ 50,001-100,000☐ More than 100,000**15. Estimated Assets**☒ \$0 - \$50,000☐ \$50,001 - \$100,000☐ \$100,001 - \$500,000☐ \$500,001 - \$1 million☐ \$1,000,001 - \$10 million☐ \$10,000,001 - \$50 million☐ \$50,000,001 - \$100 million☐ \$100,000,001 - \$500 million☐ \$500,000,001 - \$1 billion☐ \$1,000,000,001 - \$10 billion☐ \$10,000,000,001 - \$50 billion☐ More than \$50 billion**16. Estimated liabilities**☐ \$0 - \$50,000☐ \$50,001 - \$100,000☐ \$100,001 - \$500,000☒ \$500,001 - \$1 million☐ \$1,000,001 - \$10 million☐ \$10,000,001 - \$50 million☐ \$50,000,001 - \$100 million☐ \$100,000,001 - \$500 million☐ \$500,000,001 - \$1 billion☐ \$1,000,000,001 - \$10 billion☐ \$10,000,000,001 - \$50 billion☐ More than \$50 billion

Debtor **Simplicity Sofas, Inc.**  
Name

Case number (if known)

**Request for Relief, Declaration, and Signatures****WARNING --** Bankruptcy fraud is a serious crime. Making a false statement in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.**17. Declaration and signature  
of authorized  
representative of debtor**

The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition.

I have been authorized to file this petition on behalf of the debtor.

I have examined the information in this petition and have a reasonable belief that the information is true and correct.

I declare under penalty of perjury that the foregoing is true and correct.

Executed on **June 13, 2017**  
MM / DD / YYYY**X /s/ Jeffrey Alan Frank**

Signature of authorized representative of debtor

**Jeffrey Alan Frank**

Printed name

Title **President****18. Signature of attorney****X /s/ Samantha K. Brumbaugh**

Signature of attorney for debtor

Date **June 13, 2017**

MM / DD / YYYY

**Samantha K. Brumbaugh**

Printed name

**Ivey, McClellan, Gatton & Siegmund**

Firm name

**100 S. Elm St, Ste. 500  
Greensboro, NC 27401**

Number, Street, City, State &amp; ZIP Code

Contact phone **336-274-4658**

Email address

**32379**

Bar number and State

**Fill in this information to identify the case:**Debtor name **Simplicity Sofas, Inc.**United States Bankruptcy Court for the: MIDDLE DISTRICT OF NORTH CAROLINA

Case number (if known) \_\_\_\_\_

☐ Check if this is an amended filingOfficial Form 202**Declaration Under Penalty of Perjury for Non-Individual Debtors**

12/15

An individual who is authorized to act on behalf of a non-individual debtor, such as a corporation or partnership, must sign and submit this form for the schedules of assets and liabilities, any other document that requires a declaration that is not included in the document, and any amendments of those documents. This form must state the individual's position or relationship to the debtor, the identity of the document, and the date. Bankruptcy Rules 1008 and 9011.

**WARNING -- Bankruptcy fraud is a serious crime. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.**

**Declaration and signature**

I am the president, another officer, or an authorized agent of the corporation; a member or an authorized agent of the partnership; or another individual serving as a representative of the debtor in this case.

I have examined the information in the documents checked below and I have a reasonable belief that the information is true and correct:

- ☒ *Schedule A/B: Assets—Real and Personal Property* (Official Form 206A/B)
- ☒ *Schedule D: Creditors Who Have Claims Secured by Property* (Official Form 206D)
- ☒ *Schedule E/F: Creditors Who Have Unsecured Claims* (Official Form 206E/F)
- ☒ *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G)
- ☒ *Schedule H: Codebtors* (Official Form 206H)
- ☒ *Summary of Assets and Liabilities for Non-Individuals* (Official Form 206Sum)
- ☐ Amended Schedule \_\_\_\_\_
- ☐ Chapter 11 or Chapter 9 Cases: List of Creditors Who Have the 20 Largest Unsecured Claims and Are Not Insiders (Official Form 204)
- ☐ Other document that requires a declaration \_\_\_\_\_

I declare under penalty of perjury that the foregoing is true and correct.

Executed on **June 13, 2017****X /s/ Jeffrey Alan Frank**

Signature of individual signing on behalf of debtor

**Jeffrey Alan Frank**

Printed name

**President**

Position or relationship to debtor

**Fill in this information to identify the case:**Debtor name **Simplicity Sofas, Inc.**United States Bankruptcy Court for the: MIDDLE DISTRICT OF NORTH CAROLINA

Case number (if known) \_\_\_\_\_

☐ Check if this is an amended filing**Official Form 206Sum  
Summary of Assets and Liabilities for Non-Individuals**

12/15

**Part 1: Summary of Assets****1. Schedule A/B: Assets-Real and Personal Property** (Official Form 206A/B)**1a. Real property:**Copy line 88 from *Schedule A/B*..... \$ **0.00****1b. Total personal property:**Copy line 91A from *Schedule A/B*..... \$ **9,130.00****1c. Total of all property:**Copy line 92 from *Schedule A/B*..... \$ **9,130.00****Part 2: Summary of Liabilities****2. Schedule D: Creditors Who Have Claims Secured by Property** (Official Form 206D)Copy the total dollar amount listed in Column A, *Amount of claim*, from line 3 of *Schedule D*..... \$ **188,499.92****3. Schedule E/F: Creditors Who Have Unsecured Claims** (Official Form 206E/F)**3a. Total claim amounts of priority unsecured claims:**Copy the total claims from Part 1 from line 5a of *Schedule E/F*..... \$ **0.00****3b. Total amount of claims of nonpriority amount of unsecured claims:**Copy the total of the amount of claims from Part 2 from line 5b of *Schedule E/F*..... +\$ **318,208.01****4. Total liabilities** .....  
Lines 2 + 3a + 3b\$ **506,707.93**

**Fill in this information to identify the case:**Debtor name **Simplicity Sofas, Inc.**United States Bankruptcy Court for the: **MIDDLE DISTRICT OF NORTH CAROLINA**

Case number (if known) \_\_\_\_\_

☐ Check if this is an amended filing**Official Form 206A/B****Schedule A/B: Assets - Real and Personal Property**

12/15

Disclose all property, real and personal, which the debtor owns or in which the debtor has any other legal, equitable, or future interest. Include all property in which the debtor holds rights and powers exercisable for the debtor's own benefit. Also include assets and properties which have no book value, such as fully depreciated assets or assets that were not capitalized. In Schedule A/B, list any executory contracts or unexpired leases. Also list them on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G).

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. At the top of any pages added, write the debtor's name and case number (if known). Also identify the form and line number to which the additional information applies. If an additional sheet is attached, include the amounts from the attachment in the total for the pertinent part.

For Part 1 through Part 11, list each asset under the appropriate category or attach separate supporting schedules, such as a fixed asset schedule or depreciation schedule, that gives the details for each asset in a particular category. List each asset only once. In valuing the debtor's interest, do not deduct the value of secured claims. See the instructions to understand the terms used in this form.

**Part 1: Cash and cash equivalents****1. Does the debtor have any cash or cash equivalents?**

- ☐ No. Go to Part 2.  
☒ Yes Fill in the information below.

**All cash or cash equivalents owned or controlled by the debtor****Current value of debtor's interest****3. Checking, savings, money market, or financial brokerage accounts (Identify all)**

Name of institution (bank or brokerage firm)

Type of account

Last 4 digits of account number

**First Citizens Bank**  
**account is approximately negative**  
**\$6,652.18, including all outstanding**  
**3.1. checks**

**Basic Business**  
**Checking**

**0446****\$0.00****4. Other cash equivalents (Identify all)****5. Total of Part 1.**

Add lines 2 through 4 (including amounts on any additional sheets). Copy the total to line 80.

**\$0.00****Part 2: Deposits and Prepayments****6. Does the debtor have any deposits or prepayments?**

- ☐ No. Go to Part 3.  
☒ Yes Fill in the information below.

**7. Deposits, including security deposits and utility deposits**

Description, including name of holder of deposit

**security deposit--to Preferred Furniture Components, Inc., for premises located at 1711**  
**7.1. Preferred Way, High Point, NC (see Schedule G)**

**\$7,020.00****8. Prepayments, including prepayments on executory contracts, leases, insurance, taxes, and rent**

Description, including name of holder of prepayment

Debtor **Simplicity Sofas, Inc.**  
Name

Case number (If known) \_\_\_\_\_

9. **Total of Part 2.**

Add lines 7 through 8. Copy the total to line 81.

**\$7,020.00****Part 3: Accounts receivable**10. **Does the debtor have any accounts receivable?**

- ☒ No. Go to Part 4.  
☐ Yes Fill in the information below.

**Part 4: Investments**13. **Does the debtor own any investments?**

- ☒ No. Go to Part 5.  
☐ Yes Fill in the information below.

**Part 5: Inventory, excluding agriculture assets**18. **Does the debtor own any inventory (excluding agriculture assets)?**

- ☒ No. Go to Part 6.  
☐ Yes Fill in the information below.

**Part 6: Farming and fishing-related assets (other than titled motor vehicles and land)**27. **Does the debtor own or lease any farming and fishing-related assets (other than titled motor vehicles and land)?**

- ☒ No. Go to Part 7.  
☐ Yes Fill in the information below.

**Part 7: Office furniture, fixtures, and equipment; and collectibles**38. **Does the debtor own or lease any office furniture, fixtures, equipment, or collectibles?**

- ☒ No. Go to Part 8.  
☐ Yes Fill in the information below.

**Part 8: Machinery, equipment, and vehicles**46. **Does the debtor own or lease any machinery, equipment, or vehicles?**

- ☒ No. Go to Part 9.  
☐ Yes Fill in the information below.

**Part 9: Real property**54. **Does the debtor own or lease any real property?**

- ☒ No. Go to Part 10.  
☐ Yes Fill in the information below.

**Part 10: Intangibles and intellectual property**59. **Does the debtor have any interests in intangibles or intellectual property?**

- ☐ No. Go to Part 11.  
☒ Yes Fill in the information below.

**General description****Net book value of  
debtor's interest**  
(Where available)**Valuation method used  
for current value****Current value of  
debtor's interest**



Debtor Simplicity Sofas, Inc. Case number (If known) \_\_\_\_\_

Name

60. **Patents, copyrights, trademarks, and trade secrets**  
**Simplicity Sofa, US Trademark Registration**  
**No. 3,972,910**  
**value of trademark is approximately \$1,500.00;**  
**however that value is reduced by the renewal**  
**fee due in June, 2017.**

	\$0.00	N/A	\$215.00
--	--------	-----	----------

<b>Simplicity in Motion trademark</b> <b>in application process</b>	\$0.00	N/A	\$0.00
--	--------	-----	--------

61. **Internet domain names and websites**  
**www.simplicitysofas.com website**

	\$0.00	N/A	\$1,000.00
--	--------	-----	------------

**domain names:**  
**simplicitysofa.com**  
**furnitureforsmallspaces.com**  
**furnitureforsmallapartments.com**  
**simplicity-in-motion.com**  
**simplysofa.com**

	\$0.00	N/A	\$895.00
--	--------	-----	----------

62. **Licenses, franchises, and royalties**63. **Customer lists, mailing lists, or other compilations**64. **Other intangibles, or intellectual property**65. **Goodwill**66. **Total of Part 10.****\$2,110.00**

Add lines 60 through 65. Copy the total to line 89.

67. **Do your lists or records include personally identifiable information of customers** (as defined in 11 U.S.C. §§ 101(41A) and 107?)☒ No☐ Yes68. **Is there an amortization or other similar schedule available for any of the property listed in Part 10?**☒ No☐ Yes69. **Has any of the property listed in Part 10 been appraised by a professional within the last year?**☒ No☐ Yes**Part 11: All other assets**70. **Does the debtor own any other assets that have not yet been reported on this form?**

Include all interests in executory contracts and unexpired leases not previously reported on this form.

☒ No. Go to Part 12.☐ Yes Fill in the information below.

Debtor **Simplicity Sofas, Inc.**  
Name

Case number (If known) \_\_\_\_\_

**Part 12: Summary**

In Part 12 copy all of the totals from the earlier parts of the form

Type of property	Current value of personal property	Current value of real property
80. <b>Cash, cash equivalents, and financial assets.</b> <i>Copy line 5, Part 1</i>	<b>\$0.00</b>	
81. <b>Deposits and prepayments.</b> <i>Copy line 9, Part 2.</i>	<b>\$7,020.00</b>	
82. <b>Accounts receivable.</b> <i>Copy line 12, Part 3.</i>	<b>\$0.00</b>	
83. <b>Investments.</b> <i>Copy line 17, Part 4.</i>	<b>\$0.00</b>	
84. <b>Inventory.</b> <i>Copy line 23, Part 5.</i>	<b>\$0.00</b>	
85. <b>Farming and fishing-related assets.</b> <i>Copy line 33, Part 6.</i>	<b>\$0.00</b>	
86. <b>Office furniture, fixtures, and equipment; and collectibles.</b> <i>Copy line 43, Part 7.</i>	<b>\$0.00</b>	
87. <b>Machinery, equipment, and vehicles.</b> <i>Copy line 51, Part 8.</i>	<b>\$0.00</b>	
88. <b>Real property.</b> <i>Copy line 56, Part 9.....&gt;</i>		<b>\$0.00</b>
89. <b>Intangibles and intellectual property.</b> <i>Copy line 66, Part 10.</i>	<b>\$2,110.00</b>	
90. <b>All other assets.</b> <i>Copy line 78, Part 11.</i>	<b>+</b> <b>\$0.00</b>	
91. <b>Total.</b> Add lines 80 through 90 for each column	<b>\$9,130.00</b>	<b>+ 91b. \$0.00</b>
92. <b>Total of all property on Schedule A/B.</b> Add lines 91a+91b=92		<b>\$9,130.00</b>

**Fill in this information to identify the case:**Debtor name **Simplicity Sofas, Inc.**United States Bankruptcy Court for the: **MIDDLE DISTRICT OF NORTH CAROLINA**

Case number (if known) \_\_\_\_\_

☐ Check if this is an amended filing**Official Form 206D****Schedule D: Creditors Who Have Claims Secured by Property****12/15****Be as complete and accurate as possible.****1. Do any creditors have claims secured by debtor's property?**

- ☐ No. Check this box and submit page 1 of this form to the court with debtor's other schedules. Debtor has nothing else to report on this form.
- ☒ Yes. Fill in all of the information below.

**Part 1: List Creditors Who Have Secured Claims**

2. List in alphabetical order all creditors who have secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim.

		Column A Amount of claim  Do not deduct the value of collateral.	Column B Value of collateral that supports this claim	
<b>2.1</b>	<b>Funding Circle</b> Creditor's Name <b>747 Front Street</b> <b>4th Floor</b> <b>San Francisco, CA 94111</b> Creditor's mailing address  Creditor's email address, if known  <b>Date debt was incurred</b> <b>12/2015</b> <b>Last 4 digits of account number</b>  <b>Do multiple creditors have an interest in the same property?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Specify each creditor, including this creditor and its relative priority.	Describe debtor's property that is subject to a lien <b>machinery, equipment, furniture, intangibles</b>  Describe the lien <b>UCC</b> Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Is anyone else liable on this claim? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H)  <b>As of the petition filing date, the claim is:</b> Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$85,000.00</b>	<b>\$1,000.00</b>

<b>2.2</b>	<b>RFS Business Funding, LLC</b> Creditor's Name <b>4500 East West Highway,</b> <b>6th Floor</b> <b>Bethesda, MD 20814</b> Creditor's mailing address  Creditor's email address, if known  <b>Date debt was incurred</b> <b>12/2016</b> <b>Last 4 digits of account number</b>  <b>Do multiple creditors have an interest in the same property?</b>	Describe debtor's property that is subject to a lien <b>machinery, equipment, furniture, intangibles</b>  Describe the lien <b>UCC</b> Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Is anyone else liable on this claim? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H)  <b>As of the petition filing date, the claim is:</b> Check all that apply	<b>\$103,499.92</b>	<b>\$1,000.00</b>
------------	--	--	---------------------	-------------------

Debtor **Simplicity Sofas, Inc.**

Case number (if know)

Name

☒ No☐ Contingent☐ Yes. Specify each creditor, including this creditor and its relative priority.☐ Unliquidated☐ Disputed

3. Total of the dollar amounts from Part 1, Column A, including the amounts from the Additional Page, if any.

**\$188,499.92****Part 2: List Others to Be Notified for a Debt Already Listed in Part 1**

List in alphabetical order any others who must be notified for a debt already listed in Part 1. Examples of entities that may be listed are collection agencies, assignees of claims listed above, and attorneys for secured creditors.

If no others need to be notified for the debts listed in Part 1, do not fill out or submit this page. If additional pages are needed, copy this page.

Name and address

On which line in Part 1 did you enter the related creditor?

Last 4 digits of account number for this entity

FC Marketplace  
P.O. Box 1719  
Portland, OR 97207Line 2.1Raleigh Lancaster  
4500 E West Highway, 6th Floor  
Bethesda, MD 20814Line 2.2

**Fill in this information to identify the case:**Debtor name **Simplicity Sofas, Inc.**United States Bankruptcy Court for the: **MIDDLE DISTRICT OF NORTH CAROLINA**

Case number (if known) \_\_\_\_\_

☐ Check if this is an amended filing**Official Form 206E/F****Schedule E/F: Creditors Who Have Unsecured Claims**

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY unsecured claims and Part 2 for creditors with NONPRIORITY unsecured claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on *Schedule A/B: Assets - Real and Personal Property* (Official Form 206A/B) and on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G). Number the entries in Parts 1 and 2 in the boxes on the left. If more space is needed for Part 1 or Part 2, fill out and attach the Additional Page of that Part included in this form.

**Part 1: List All Creditors with PRIORITY Unsecured Claims****1. Do any creditors have priority unsecured claims?** (See 11 U.S.C. § 507).☐ No. Go to Part 2.☒ Yes. Go to line 2.**2. List in alphabetical order all creditors who have unsecured claims that are entitled to priority in whole or in part.** If the debtor has more than 3 creditors with priority unsecured claims, fill out and attach the Additional Page of Part 1.

			Total claim	Priority amount
2.1	Priority creditor's name and mailing address <b>Credit Bureau</b> <b>P.O. Box 26140</b> <b>Greensboro, NC 27402</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$0.00</b>	<b>\$0.00</b>
	Date or dates debt was incurred  Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)	Basis for the claim: <b>notices only</b>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
2.2	Priority creditor's name and mailing address <b>Employment Security Commission</b> <b>P.O. Box 26504</b> <b>Raleigh, NC 27611</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$0.00</b>	<b>\$0.00</b>
	Date or dates debt was incurred  Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)	Basis for the claim: <b>notices only</b>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

Debtor	<b>Simplicity Sofas, Inc.</b> Name	Case number (if known)
--------	---------------------------------------	------------------------

---

2.3	Priority creditor's name and mailing address <b>Guilford County Tax Dept.</b> <b>P.O. Box 3328</b> <b>Greensboro, NC 27402</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$0.00</b>	<b>\$0.00</b>
-----	---	--	---------------	---------------

---

Date or dates debt was incurred  Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)	Basis for the claim:  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
--	---

---

2.4	Priority creditor's name and mailing address <b>Internal Revenue Service</b> <b>P.O. Box 7346</b> <b>Philadelphia, PA 19101</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$0.00</b>	<b>\$0.00</b>
-----	--	--	---------------	---------------

---

Date or dates debt was incurred  Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)	Basis for the claim: <b>notices only</b>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
--	--

---

2.5	Priority creditor's name and mailing address <b>NC Department of Revenue</b> <b>P.O. Box 1168</b> <b>Raleigh, NC 27640</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$0.00</b>	<b>\$0.00</b>
-----	---	--	---------------	---------------

---

Date or dates debt was incurred  Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)	Basis for the claim: <b>notices only</b>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
--	--

**Part 2: List All Creditors with NONPRIORITY Unsecured Claims**

3. List in alphabetical order all of the creditors with nonpriority unsecured claims. If the debtor has more than 6 creditors with nonpriority unsecured claims, fill out and attach the Additional Page of Part 2.

3.1	Nonpriority creditor's name and mailing address <b>American West</b> <b>P.O. Box 641001</b> <b>Dallas, TX 75264</b>  Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: <b>freight</b>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$379.49</b>	
-----	--	---	-----------------	--

---

3.2	Nonpriority creditor's name and mailing address <b>Arnold's Pest Control</b> <b>P.O. Box 902</b> <b>Trinity, NC 27370</b>  Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: <b>services rendered</b>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$120.00</b>	
-----	--	---	-----------------	--

Debtor	<b>Simplicity Sofas, Inc.</b> Name	Case number (if known)
--------	---------------------------------------	------------------------

---

3.3	<b>Nonpriority creditor's name and mailing address</b> <b>Carolina Publications, Inc.</b> <b>2216 W. Meadowview Road, Suite 104</b> <b>Greensboro, NC 27407</b>  Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>advertising cost</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$450.00</b>
-----	--	--	-----------------

---

3.4	<b>Nonpriority creditor's name and mailing address</b> <b>City of High Point</b> <b>P.O. Box 10039</b> <b>High Point, NC 27261</b>  Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>utility service</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$2,823.97</b>
-----	---	---	-------------------

---

3.5	<b>Nonpriority creditor's name and mailing address</b> <b>Consumer Affairs</b> <b>297 Kingsbury Grade, Suite 1025</b> <b>Mailbox 4470</b> <b>Stateline, NV 89449</b>  Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>advertising</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$900.00</b>
-----	--	---	-----------------

---

3.6	<b>Nonpriority creditor's name and mailing address</b> <b>Culp Fabrics</b> <b>P.O. Box 751007</b> <b>Charlotte, NC 28275</b>  Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>materials</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$219.22</b>
-----	---	---	-----------------

---

3.7	<b>Nonpriority creditor's name and mailing address</b> <b>Glenn Laughlin</b> <b>3331 Earnhardt Road</b> <b>Sophia, NC 27350</b>  Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>royalties</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$7,023.30</b>
-----	--	---	-------------------

---

3.8	<b>Nonpriority creditor's name and mailing address</b> <b>Gum Tree Fabrics, Inc.</b> <b>4002 S eason Boulevard</b> <b>Tupelo, MS 38802</b>  Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>fabric</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$154.23</b>
-----	---	--	-----------------

---

3.9	<b>Nonpriority creditor's name and mailing address</b> <b>High Point Chamber of Commerce</b> <b>P.O. Box 5025</b> <b>High Point, NC 27262</b>  Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>dues</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$350.00</b>
-----	--	--	-----------------

---

Debtor	<b>Simplicity Sofas, Inc.</b> <small>Name</small>	Case number (if known) _____
--------	--	------------------------------

---

3.10	<b>Nonpriority creditor's name and mailing address</b> <b>High Point Fabrics</b> <b>1011 Baker Road</b> <b>High Point, NC 27263</b> Date(s) debt was incurred _____ Last 4 digits of account number _____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u><b>fabric</b></u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$1,156.00</b>
------	--	---	-------------------

---

3.11	<b>Nonpriority creditor's name and mailing address</b> <b>Jeffrey A. Frank</b> <b>710 Westchester Drive, Apt. J</b> <b>High Point, NC 27262</b> Date(s) debt was incurred _____ Last 4 digits of account number _____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u><b>unsecured loan</b></u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$237,760.41</b>
------	--	---	---------------------

---

3.12	<b>Nonpriority creditor's name and mailing address</b> <b>Jeffrey A. Frank</b> <b>710 Westchester Drive, Apt. J</b> <b>High Point, NC 27262</b> Date(s) debt was incurred _____ Last 4 digits of account number _____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u><b>royalties; amount is approximate</b></u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$20,000.00</b>
------	--	---	--------------------

---

3.13	<b>Nonpriority creditor's name and mailing address</b> <b>Kabbage</b> <b>P.O. Box 77073</b> <b>Atlanta, GA 30357</b> Date(s) debt was incurred _____ Last 4 digits of account number _____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u><b>unsecured loan</b></u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$28,500.00</b>
------	---	---	--------------------

---

3.14	<b>Nonpriority creditor's name and mailing address</b> <b>Leggett &amp; Platt</b> <b>1430 Sherman Court</b> <b>High Point, NC 27260</b> Date(s) debt was incurred _____ Last 4 digits of account number _____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u><b>materials</b></u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$1,814.92</b>
------	--	--	-------------------

---

3.15	<b>Nonpriority creditor's name and mailing address</b> <b>Manna Freight Systems</b> <b>P.O. Box 9202</b> <b>Minneapolis, MN 55480</b> Date(s) debt was incurred _____ Last 4 digits of account number _____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u><b>freight charges</b></u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$812.51</b>
------	--	--	-----------------

---

3.16	<b>Nonpriority creditor's name and mailing address</b> <b>Morgan Fabrics</b> <b>P.O. Box 58523</b> <b>Los Angeles, CA 90058</b> Date(s) debt was incurred _____ Last 4 digits of account number _____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u><b>fabric</b></u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$839.49</b>
------	--	---	-----------------



Debtor	<b>Simplicity Sofas, Inc.</b> <small>Name</small>	Case number (if known) _____
--------	--	------------------------------

---

3.17	<b>Nonpriority creditor's name and mailing address</b> <b>Optima Leathers</b> <b>552 Cherry Lane</b> <b>Floral Park, NY 11001</b>  Date(s) debt was incurred _____ Last 4 digits of account number _____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>materials</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$956.38</b>
------	--	---	-----------------

---

3.18	<b>Nonpriority creditor's name and mailing address</b> <b>Piedmont Natural Gas</b> <b>P.O. Box 660920</b> <b>Dallas, TX 75266</b>  Date(s) debt was incurred _____ Last 4 digits of account number _____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>utility service</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$103.22</b>
------	--	---	-----------------

---

3.19	<b>Nonpriority creditor's name and mailing address</b> <b>Pitney Bowes</b> <b>P.O. Box 856042</b> <b>Louisville, KY 40285</b>  Date(s) debt was incurred _____ Last 4 digits of account number _____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>postage fees</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$32.01</b>
------	--	--	----------------

---

3.20	<b>Nonpriority creditor's name and mailing address</b> <b>Protection Systems, Inc.</b> <b>P.O. Box 5427</b> <b>High Point, NC 27262</b>  Date(s) debt was incurred _____ Last 4 digits of account number _____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>services rendered</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$209.03</b>
------	--	---	-----------------

---

3.21	<b>Nonpriority creditor's name and mailing address</b> <b>Republic Services</b> <b>2875 Lowery St.</b> <b>Winston Salem, NC 27101</b>  Date(s) debt was incurred _____ Last 4 digits of account number _____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>waste services</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$123.25</b>
------	--	--	-----------------

---

3.22	<b>Nonpriority creditor's name and mailing address</b> <b>Smith Leonard PLLC</b> <b>4035 Premeir Drive, Ste. 300</b> <b>High Point, NC 27265</b>  Date(s) debt was incurred _____ Last 4 digits of account number _____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>services rendered</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$3,000.00</b>
------	---	---	-------------------

---

3.23	<b>Nonpriority creditor's name and mailing address</b> <b>Spectrum Business</b> <b>P.O. Box 77169</b> <b>Charlotte, NC 28271</b>  Date(s) debt was incurred _____ Last 4 digits of account number _____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>telephone/internet services</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$169.99</b>
------	---	---	-----------------

Debtor **Simplicity Sofas, Inc.**  
Name

Case number (if known)

<b>3.24</b> Nonpriority creditor's name and mailing address <b>UPS Freight</b> <b>P.O. Box 650690</b> <b>Dallas, TX 75265</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>freight costs</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$9,007.14</b>
<b>3.25</b> Nonpriority creditor's name and mailing address <b>Verizon Wireless</b> <b>P.O. Box 4001</b> <b>Acworth, GA 30101</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>cell phone services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$92.85</b>
<b>3.26</b> Nonpriority creditor's name and mailing address <b>Wearbest</b> <b>325 Midland Ave</b> <b>Garfield, NJ 07026</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>materials</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$1,210.60</b>

**Part 3: List Others to Be Notified About Unsecured Claims**

4. List in alphabetical order any others who must be notified for claims listed in Parts 1 and 2. Examples of entities that may be listed are collection agencies, assignees of claims listed above, and attorneys for unsecured creditors.

If no others need to be notified for the debts listed in Parts 1 and 2, do not fill out or submit this page. If additional pages are needed, copy the next page.

	Name and mailing address	On which line in Part 1 or Part 2 is the related creditor (if any) listed?	Last 4 digits of account number, if any
4.1	<b>Consumer Affairs</b> <b>P.O. Box 670661</b> <b>Dallas, TX 75267</b>	Line <u>3.5</u>  <input type="checkbox"/> Not listed. Explain ____	—
4.2	<b>UPS-Freight</b> <b>Attn: Sandra Mraz</b> <b>A/R Collections</b> <b>700 Keystone Industrial Park</b> <b>Scranton, PA 18512</b>	Line <u>3.24</u>  <input type="checkbox"/> Not listed. Explain ____	—

**Part 4: Total Amounts of the Priority and Nonpriority Unsecured Claims**

5. Add the amounts of priority and nonpriority unsecured claims.

5a. Total claims from Part 1	5a. \$ <u>0.00</u>
5b. Total claims from Part 2	5b. + \$ <u>318,208.01</u>
5c. Total of Parts 1 and 2 Lines 5a + 5b = 5c.	5c. \$ <u>318,208.01</u>

**Fill in this information to identify the case:**Debtor name **Simplicity Sofas, Inc.**United States Bankruptcy Court for the: **MIDDLE DISTRICT OF NORTH CAROLINA**

Case number (if known) \_\_\_\_\_

☐ Check if this is an amended filing**Official Form 206G****Schedule G: Executory Contracts and Unexpired Leases****12/15****Be as complete and accurate as possible. If more space is needed, copy and attach the additional page, number the entries consecutively.****1. Does the debtor have any executory contracts or unexpired leases?**☐ No. Check this box and file this form with the debtor's other schedules. There is nothing else to report on this form.☒ Yes. Fill in all of the information below even if the contacts of leases are listed on *Schedule A/B: Assets - Real and Personal* (Official Form 206A/B).*Property***2. List all contracts and unexpired leases****State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**2.1. State what the contract or lease is for and the nature of the debtor's interest **lease of phone numbers and website \$200/month**State the term remaining **2 months**

List the contract number of any government contract \_\_\_\_\_

**Dimarmel, Inc.  
414 Grayson Street  
High Point, NC 27260**2.2. State what the contract or lease is for and the nature of the debtor's interest **Asset Purchase Agreement for general intangibles, subject to Court approval.**

State the term remaining \_\_\_\_\_

List the contract number of any government contract \_\_\_\_\_

**Dimarmel, Inc.  
414 Grayson Street  
High Point, NC 27260**2.3. State what the contract or lease is for and the nature of the debtor's interest **postage machine lease**

State the term remaining \_\_\_\_\_

List the contract number of any government contract \_\_\_\_\_

**Pitney Bowes  
P.O. Box 856042  
Louisville, KY 40285**2.4. State what the contract or lease is for and the nature of the debtor's interest **Lease of premises located at 1711 Preferred Way, High Point, NC 27260**State the term remaining **3 years**

List the contract number of any government contract \_\_\_\_\_

**Preferred Furniture Components, Inc.  
P.O. Box 7168  
High Point, NC 27265**

**Fill in this information to identify the case:**Debtor name Simplicity Sofas, Inc.United States Bankruptcy Court for the: MIDDLE DISTRICT OF NORTH CAROLINA

Case number (if known) \_\_\_\_\_

☐ Check if this is an amended filing**Official Form 206H  
Schedule H: Your Codebtors**

12/15

Be as complete and accurate as possible. If more space is needed, copy the Additional Page, numbering the entries consecutively. Attach the Additional Page to this page.

**1. Do you have any codebtors?**☐ No. Check this box and submit this form to the court with the debtor's other schedules. Nothing else needs to be reported on this form.☒ Yes

**2. In Column 1, list as codebtors all of the people or entities who are also liable for any debts listed by the debtor in the schedules of creditors, Schedules D-G. Include all guarantors and co-obligors. In Column 2, identify the creditor to whom the debt is owed and each schedule on which the creditor is listed. If the codebtor is liable on a debt to more than one creditor, list each creditor separately in Column 2.**

*Column 1: Codebtor**Column 2: Creditor***Name****Mailing Address****Name***Check all schedules that apply:*2.1 **Jeffrey A. Frank****Funding Circle**☒ D 2.1☐ E/F \_\_\_\_\_☐ G \_\_\_\_\_2.2 **Jeffrey A. Frank****RFS Business  
Funding, LLC**☒ D 2.2☐ E/F \_\_\_\_\_☐ G \_\_\_\_\_

B2030 (Form 2030) (12/15)

**United States Bankruptcy Court**  
**Middle District of North Carolina**

In re **Simplicity Sofas, Inc.**

Debtor(s)

Case No.

Chapter

**7**

**DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR(S)**

1. Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the above named debtor(s) and that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:

For legal services, I have agreed to accept .....	\$	<b>2,963.00</b>
Prior to the filing of this statement I have received .....	\$	<b>2,963.00</b>
Balance Due .....	\$	<b>0.00</b>

2. \$ **335.00** of the filing fee has been paid.
3. The source of the compensation paid to me was:  
☒ Debtor      ☐ Other (specify):
4. The source of compensation to be paid to me is:  
☒ Debtor      ☐ Other (specify):
5. ☒ I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm.  
☐ I have agreed to share the above-disclosed compensation with a person or persons who are not members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation is attached.
6. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:  
a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy;  
b. Preparation and filing of any petition, schedules, statement of affairs and plan which may be required;  
c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof;  
d. [Other provisions as needed]
7. By agreement with the debtor(s), the above-disclosed fee does not include the following service:  
**Representation of the debtors in adversary proceedings & other contested bankruptcy matters.**

**CERTIFICATION**

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.

**June 13, 2017**

Date

**/s/ Samantha K. Brumbaugh****Samantha K. Brumbaugh 32379**

Signature of Attorney

**Ivey, McClellan, Gatton & Siegmund****100 S. Elm St, Ste. 500****Greensboro, NC 27401****336-274-4658 Fax: 336-274-4540**

Name of law firm

**United States Bankruptcy Court  
Middle District of North Carolina**

In re **Simplicity Sofas, Inc.**

Debtor(s)

Case No.

Chapter

**7**

**VERIFICATION OF CREDITOR MATRIX**

I, the President of the corporation named as the debtor in this case, hereby verify that the attached list of creditors is true and correct to the best of my knowledge.

Date: **June 13, 2017**

**/s/ Jeffrey Alan Frank**

**Jeffrey Alan Frank/President**

Signer/Title

American West  
P.O. Box 641001  
Dallas, TX 75264

Amiel J. Rossabi, Esq.  
3623 N. Elm Street, Suite 210  
Greensboro, NC 27455

Arnold's Pest Control  
P.O. Box 902  
Trinity, NC 27370

Carolina Publications, Inc.  
2216 W. Meadowview Road, Suite 104  
Greensboro, NC 27407

City of High Point  
P.O. Box 10039  
High Point, NC 27261

Consumer Affairs  
297 Kingsbury Grade, Suite 1025  
Mailbox 4470  
Stateline, NV 89449

Consumer Affairs  
P.O. Box 670661  
Dallas, TX 75267

Credit Bureau  
P.O. Box 26140  
Greensboro, NC 27402

Culp Fabrics  
P.O. Box 751007  
Charlotte, NC 28275

Dimarmel, Inc.  
414 Grayson Street  
High Point, NC 27260

Employment Security Commission  
P.O. Box 26504  
Raleigh, NC 27611

FC Marketplace  
P.O. Box 1719  
Portland, OR 97207

Funding Circle  
747 Front Street  
4th Floor  
San Francisco, CA 94111

Glenn Laughlin  
3331 Earnhardt Road  
Sophia, NC 27350

Guilford County Tax Dept.  
P.O. Box 3328  
Greensboro, NC 27402

Gum Tree Fabrics, Inc.  
4002 Season Boulevard  
Tupelo, MS 38802

High Point Chamber of Commerce  
P.O. Box 5025  
High Point, NC 27262

High Point Fabrics  
1011 Baker Road  
High Point, NC 27263

Internal Revenue Service  
P.O. Box 7346  
Philadelphia, PA 19101

Jeffrey A. Frank  
710 Westchester Drive, Apt. J  
High Point, NC 27262

Jeffrey A. Frank

Kabbage  
P.O. Box 77073  
Atlanta, GA 30357



Leggett & Platt  
1430 Sherman Court  
High Point, NC 27260

Manna Freight Systems  
P.O. Box 9202  
Minneapolis, MN 55480

Morgan Fabrics  
P.O. Box 58523  
Los Angeles, CA 90058

NC Department of Revenue  
P.O. Box 1168  
Raleigh, NC 27640

Optima Leathers  
552 Cherry Lane  
Floral Park, NY 11001

Piedmont Natural Gas  
P.O. Box 660920  
Dallas, TX 75266

Pitney Bowes  
P.O. Box 856042  
Louisville, KY 40285

Preferred Furniture Components, Inc.  
P.O. Box 7168  
High Point, NC 27265

Protection Systems, Inc.  
P.O. Box 5427  
High Point, NC 27262

Raleigh Lancaster  
4500 E West Highway, 6th Floor  
Bethesda, MD 20814

Republic Services  
2875 Lowery St.  
Winston Salem, NC 27101

RFS Business Funding, LLC  
4500 East West Highway, 6th Floor  
Bethesda, MD 20814

Smith Leonard PLLC  
4035 Premeir Drive, Ste. 300  
High Point, NC 27265

Spectrum Business  
P.O. Box 77169  
Charlotte, NC 28271

UPS Freight  
P.O. Box 650690  
Dallas, TX 75265

UPS-Freight  
Attn: Sandra Mraz  
A/R Collections  
700 Keystone Industrial Park  
Scranton, PA 18512

Verizon Wireless  
P.O. Box 4001  
Acworth, GA 30101

Wearbest  
325 Midland Ave  
Garfield, NJ 07026

**United States Bankruptcy Court  
Middle District of North Carolina**

In re **Simplicity Sofas, Inc.**

Debtor(s)

Case No.

Chapter

**7**

**CORPORATE OWNERSHIP STATEMENT (RULE 7007.1)**

Pursuant to Federal Rule of Bankruptcy Procedure 7007.1 and to enable the Judges to evaluate possible disqualification or recusal, the undersigned counsel for **Simplicity Sofas, Inc.** in the above captioned action, certifies that the following is a (are) corporation(s), other than the debtor or a governmental unit, that directly or indirectly own(s) 10% or more of any class of the corporation's(s') equity interests, or states that there are no entities to report under FRBP 7007.1:

■ None [*Check if applicable*]

**June 13, 2017**

Date

**/s/ Samantha K. Brumbaugh****Samantha K. Brumbaugh 32379**

Signature of Attorney or Litigant  
Counsel for **Simplicity Sofas, Inc.**  
**Ivey, McClellan, Gatton & Siegmund**

**100 S. Elm St, Ste. 500  
Greensboro, NC 27401  
336-274-4658 Fax:336-274-4540**